

MENTALLY ILL OFFENDER

Program Evaluation Survey

September 24, 1999

This survey will become part of your county's MIO contract with the Board of Corrections. For purposes of this survey:

- “Program” refers to a defined set of interventions that will be given to a specified research sample in order to evaluate well-stated hypotheses. If you have more than one Program, please fill out a separate survey for each Program.
- “Research Design” refers to the procedures you will use to test the stated hypotheses for your Program. In some instances you will have more than one Research Design for a Program, in which case a separate survey must be completed for each Research Design.
- “Project” refers to all the work that you propose to do with the MIO Grant. For example, if you have two Programs and two Research Designs for each Program, the entire effort would constitute your Project (and you would complete four surveys).

To simplify the task of completing this survey, we refer you to two sources: 1) the initial Research Design Summary Form, and 2) your Program’s responses to the technical compliance issues identified during the grant review. If no additional information was requested of a particular item on the Research Design Summary Form, you can enter the original text into the appropriate space below. If more information was requested, provide a more complete response.

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2. **Program Name:** Current Board of Corrections grant participants have found it useful to pick a name that helps them to create a Program identity (two examples are the “IDEA” Program and the “Home Run” Program). Indicate the title you will be using to refer to your Program.

CONNECTIONS

3. **Treatment Interventions:** Describe the components of the Program that you will be evaluating. Another way of saying this is, “Describe how the ‘treatment’ offenders (those in the Program) will be treated differently than the comparison offenders (e.g., services while incarcerated, more intensive supervision, more thorough assessment, a wider range of services, more aggressive case management, better aftercare).”

This project will provide intensive case management services modeled on the Assertive Community Treatment (ACT) plan to mentally ill offenders in the jail and post-release. Consistent and standardized assessments will identify the level of care to be addressed by a multi-disciplined team of professionals who will provide case

management through a three-phased process of care following release from jail. Mental health staff, the case manager, and the probation officer will work together to plan interventions at each stage. PERT will be incorporated into the system of care through the treatment planning. PERT teams will be notified of MIO will follow a protocol for notification of the assigned MIO program case manager if PERT has a contact with the MIO in the community. Through PERT –interventions in coordination with connections case managers, mentally ill offenders will access therapeutic services faster and be more likely to follow treatment regimens. Assessment and involvement with the program begins at booking and continues through release into the community, linking MIOs with intensive levels of support as necessary.

4. **Research Design:** Describe the Research Design that you will be using. Issues to be addressed here include the name of the design (e.g., true experimental design), the use of random assignment, and any special features that you will include in the design (e.g., the type of comparison group you will use for quasi-experimental designs).

The evaluation will incorporate a classic experimental design with a treatment and a control group randomly assigned after program eligibility is determined through assessment scores and identification of probation status.

- 4a. Check (✓) the statement below that best describes your Research Design. If you find that you need to check more than one statement (e.g., True experimental and Quasi-experimental), you are using more than one Research Design and will need to complete a separate copy of the survey for the other design. Also, check the statements that describe the comparisons you will be making as part of your Research Design.

Research Design (Check One)	
<input checked="" type="checkbox"/>	True experimental with random assignment to treatment and comparison groups
<input type="checkbox"/>	Quasi-experimental with matched contemporaneous groups (treatment and comparison)
<input type="checkbox"/>	Quasi-experimental with matched historical group
<input type="checkbox"/>	Other (Specify)
Comparisons (Check all that apply)	
<input type="checkbox"/>	Post-Program, Single Assessment
<input type="checkbox"/>	Post-Program, Repeated Assessments (e.g., 6 and 12 months after program separation)
<input type="checkbox"/>	Pre-Post Assessment with Single Post-Program Assessment
<input checked="" type="checkbox"/>	Pre-Post Assessment with Repeated Post-Program Assessments (e.g., 6 and 12 months after program separation)
<input type="checkbox"/>	Other (Specify)

- 4b. If you are using a historical comparison group, describe how you will control for period and cohort effects.

NOT APPLICABLE

5. **Cost/Benefit Analysis:** Indicate by checking “yes” or “no” whether you will be conducting a Program cost/benefit analysis that includes at least: a) the cost per participant of providing the interventions to the treatment and comparison groups; b) the cost savings to your county represented by the effectiveness of the treatment interventions; and, c) your assessment of the program’s future (e.g., it will continue as is, be changed significantly, be dropped) given the results of the cost/benefit analysis.

Cost/Benefit Analysis	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

- 5a. If you will perform a cost/benefit analysis, describe how that analysis will be performed.

THERE WILL NOT BE A COST BENEFIT ANALYSIS.

6. **Target Population:** This refers to the criteria that treatment and comparison subjects must meet in order to be able to participate in the research. Target criteria might include diagnostic categories, age, gender, risk level, legal history, geographical area of residence, etc. Please provide a detailed description of the criteria you will be using and how you will measure those criteria to determine eligibility.

7. **THE TARGET POPULATION ARE MENTALLY ILL OFFENDERS, CURRENTLY ON PROBATION, WHO RE-OFFENDED, ARE BOOKED INTO THE COUNTY JAIL AND HAVE GAF SCORES AT OR BELOW 50. INDIVIDUALS WHO ARE NOT CITIZENS OF THE U.S. OR WHO ARE ARRESTED ON CHARGES WITH MANDATORY PRISON SENTENCES WILL BE EXCLUDED.**

AT BOOKING INTO THE JAIL, ALL INMATES ARE INITIALLY SCREENED BY A NURSE. THOSE INMATES WHO PRESENT A POTENTIAL FOR MENTAL ILLNESS AND WHO ARE ON PROBATION ARE REFERRED TO ANOTHER LEVEL OF SCREENING POSSIBLE INCLUSION. EXCLUDED WILL BE NON-U.S. CITIZENS AND THOSE ARRESTED FOR OFFENSES WITH MANDATORY PRISON SENTENCES. WITH 15 % OF THE TOTAL JAIL POPULATION EXPECTED TO BE ELIGIBLE, SOCIO-DEMOGRAPHICS SUCH AS ETHNICITY, AGE, OFFENSE WILL BE EVENLY DISTRIBUTED ACROSS THE TWO GROUPS. INMATES WHO ARE ON PROBATION WITH POTENTIAL MENTAL ILLNESS WILL THEN BE SCREENED BY A SOCIAL WORKER TO DETERMINE IF THEY HAVE A GAF SCORE OF 50 OR LOWER. WHETHER OR NOT THEY HAVE HAD PRIOR CONTACT WITH PERT IS IRRELEVANT FOR PROGRAM INCLUSION.

- 6a. Describe any standardized instruments or procedures that will be used to determine eligibility for Program participation, and the eligibility criteria associated with each (e.g., “significant psychopathology” as measured by the MMPI, etc.)

A PSYCHO-SOCIAL HISTORY AND CLINICAL INTERVIEW WILL BE COMPLETED. THE DSM IV WILL BE USED TO ESTABLISH AN AXIS I PSYCHIATRIC DIAGNOSIS AND A GAF SCORE OF 50 OR LOWER WILL BE USED AS CRITERIA FOR ELIGIBILITY. IN ADDITION, TARGET CLIENTS MUST ALSO BE ON PROBATION WHICH WILL BE DETERMINED BY ACCESSING CRIMINAL HISTORY SCREENS THROUGH THE SUN COMPUTER SYSTEM. OTHER INSTRUMENTS THAT MAY BE USED ARE THE LSI (LEVEL OF SUPERVISION) AND THE ASUS (ADULT SUBSTANCE USERS SURVEY). ADDITIONAL INSTRUMENTS MAY BE DETERMINED WHEN THE TOTAL TEAM IS ON BOARD.

8. **Sample Size:** This refers to the number of subjects who will participate in the treatment and comparison samples during the entire course of the research. Of course, in any applied research program, subjects drop out for various reasons (e.g., moving out of the county, failure to complete the program). In addition, there will probably be mentally ill offenders who participate in the Program you will be researching and not be part of the research sample (e.g., they may not meet one or more of the criteria for participation in the research), or they may enter into the Program too late for you to conduct the follow-up the research you intend to do. **Using the table below**, indicate the number of participants who will complete the treatment interventions or comparison group interventions, plus the minimum six months follow-up period after Program completion. This also will be the number of subjects that you will be including in your statistical hypothesis testing to evaluate the Program outcomes. Provide a breakdown of the sample sizes for each of the four Program years, as well as the total Program. Under **Unit of Analysis**, check the box that best describes the unit of analysis you will be using in your design.

Sample Sizes (Write the expected number in each group)		
Program Year	Treatment Group	Comparison Group
First Year 99-00	10	10

Second Year00-01	140	140
Third Year 01-02	75	75
Total	225	225
Unit of Analysis (Check one)		
<input checked="" type="checkbox"/> Individual Offender		Family
<input type="checkbox"/> Institution		Geographic Area (e.g., neighborhood)
<input type="checkbox"/> Other		Other:

8. **Key Dates:**

- "Program Operational" is the date that the first treatment subject will start in the Program.
- "Final Treatment Completion" is the date when the last treatment subject in the research sample will finish the interventions that constitute the Program (and before the start of the follow-up period).
- "Final Follow Up Data" is the date when the last follow-up data will be gathered on a research subject (e.g., six months after the last subject completes the treatment interventions or whenever these data will become available).

Program Operational Date: **JUNE 2000**

Final Treatment Completion Date: **JANUARY 2002**

Final Follow-Up Data Date: **APRIL 2003**

9. **Matching Criteria:** (Whether or not you are using a true experimental design), please indicate the variables that you will be tracking to assess comparability between the groups. Matching criteria might include: age, gender, ethnicity, socioeconomic status, criminal history mental health diagnosis, etc.

MATCHING VARIABLES WILL INCLUDE GENDER, AGE, ETHNICITY, OFFENSE, CRIMINAL HISTORY, SOCIOECONOMIC STATUS, AND GAF SCORES.

- 9a. After each characteristic listed above, describe how it will be measured.

GENDER: MALE OR FEMALE (NUMBER AND PROPORTION)

ETHNICITY: BLACK, WHITE, HISPANIC, ASIAN/PACIFIC ISLANDER, NATIVE AMERICAN, OTHER (NUMBER AND PROPORTION)

AGE: GROUPINGS, E.G., 18-24; 25-31; 32-38; 39-45; 46-52; 53-59; 60 AND OVER (MEAN AGE AND PROPORTIONS)

CRIMINAL HISTORY: ARRESTS AND CONVICTIONS TWO YEARS PRIOR TO INTAKE (NUMBER AND TYPE AND LEVEL OF OFFENSE; NUMBER, MEAN, AND PROPORTIONS BY CATEGORY EMPLOYMENT (Y/N); INCOME (CATEGORIES)

GAF SCORES: MEANS AND PROPORTIONS

- 9b. Which of these characteristics, if unequally distributed between the treatment and comparison groups, would complicate or confound the tests of your hypotheses? How will you manage that problem?

THE USE OF RANDOM ASSIGNMENT PRECLUDES THIS POTENTIAL.

- 9c. If you are using an historical comparison group, describe how you will ensure comparability (in terms of target population and matching characteristics) between the groups.

NOT APPLICABLE

10. **Comparison Group:** The intent here is to document the kind of comparison group you will using. If you are using a true experimental design, the comparison group will be randomly selected from the same subject pool as the treatment subjects (in which case you would enter "true experimental design" in the space below). However, for quasi-experimental designs, the comparison group might come from a number of different sources such as: matched institutions, matched geographical areas, other matched counties, a matched historical group, etc.

Please identify the source of your comparison group.

TRUE EXPERIMENTAL DESIGN

11. **Assessment Process:** The intent here is to summarize the assessment process that will determine the nature of the interventions that the mentally ill offenders in the treatment group will receive. For example, psychological testing, multi-agency and/or multi-disciplinary assessments, etc. Also, describe the qualifications of those who will be doing the assessments.

AS NOTED IN 6A., THE GLOBAL ASSESSMENT FUNCTIONING (GAF) SCALE, DSM IV DIAGNOSTIC CRITERIA, THE LSI, THE ASUS, A PSYCHOSOCIAL INTERVIEW, AND A SCREENING INSTRUMENT USED BY THE JAIL GATE NURSE WILL BE USED TO DETERMINE THE NATURE OF THE INTERVENTIONS. INDIVIDUALS WHO ARE PART OF THE TEAM WILL BE DEPUTY PROBATION OFFICERS, MARRIAGE AND FAMILY THERAPISTS, AND LICENSED CLINICAL SOCIAL WORKERS, VOCATIONAL REHABILITATION COUNSELORS, AND A PSYCHIATRIST. BESIDES THEIR EDUCATIONAL TRAINING AND EXPERIENCE, THE PROJECT INTENDS TO PROVIDE ADDITIONAL TRAINING TO TEAM MEMBERS.

11a. Describe any standardized assessment instruments that will be administered to all treatment group subjects for the purposes of identifying appropriate interventions.

THE INSTRUMENTS DESCRIBED IN 6A AND IN 11 WILL BE USED. OTHERS MAY BE USED WHEN THE TEAM IS HIRED.

11b Describe any assessment instrument designed by your county that you will use.

A SCREENING TOOL USED BY THE “JAIL GATE NURSE” TO IDENTIFY POTENTIAL MENTAL ILLNESS.

11c. Identify which assessment instruments, if any, will also be administered to comparison group subjects.

COMPARISON GROUP WILL BE ASSESSED AT INTAKE WITH THE DSM IV CRITERIA AS WELL AS WITH A PSYCHOSOCIAL PERSONAL HISTORY INSTRUMENT, AND THE JAIL GATE NURSE SCREENING TOOL. POTENTIALLY, THE LSI AND THE ASUS WILL BE USED, BUT THIS WILL BE DETERMINED AT A LATER TIME.

12. **Treatment Group Eligibility:** Indicate the process (as opposed to the criteria) by which research subjects will be selected into the pool from which treatment subjects will be chosen. This process might include referral by a judge, referral by a school official, referral by a law enforcement officer, administration of a risk assessment instrument, etc.

AFTER BEING BOOKED INTO THE JAIL, ALL INDIVIDUALS ARE INTERVIEWED BY THE JAIL GATE NURSE TO IDENTIFY POTENTIAL MENTAL ILLNESS. IT WILL BE DETERMINED IF THE SUBJECT IS CURRENTLY ON PROBATION. THE GATE NURSE WILL REFER THOSE IDENTIFIED AS HAVING MENTAL ILLNESS AND ON PROBATION TO A SOCIAL WORKER WHO WILL COMPLETE AN IN-DEPTH PSYCHO-SOCIAL ASSESSMENT AND CLINICAL INTERVIEW. IF AN INDIVIDUAL MEETS ELIGIBILITY CRITERIA, THE SOCIAL WORKER WILL CONTACT THE RESEARCHERS WHO WILL IDENTIFY THE SUBJECT AS IN THE TREATMENT OR CONTROL GROUP BY USING A RANDOM NUMBERS TABLE. RESEARCHERS WILL OBTAIN THE INMATE NAME AND BOOKING NUMBER AND TO WHICH GROUP THE INMATE IS ASSIGNED. THE PROGRAM’S STRATEGIC COMMITTEE WILL MEET TO REFINE ADDITIONAL CONDITIONS FOR ACTUAL ENROLLMENT IN THE PROGRAM.

13. **Comparison Group Eligibility:** Indicate the process by which research subjects will be selected into the pool from which comparison subjects will be chosen. For true experimental designs, this process will be the same as for treatment group. **THE PROCESS WILL BE THE SAME.**

- 13a. If procedures for determining the eligibility of participants for the Comparison Group differ from those described in 12, please describe them. If different procedures are used, how will you ensure comparability of the two groups in terms of critical characteristics?

Answer questions 14 - 17 by filling in the table below as instructed.

14. **Outcome Variables:** In the table below, list some of the most important outcome variables that you are hypothesizing will be positively affected by your Program. Possibilities include improvement in personal functioning, arrest rate, successful completion of probation, alcohol and drug-related behavior, risk classification, etc.
15. **Score/Scale:** To "measure" the effects produced by your Program requires putting the variable in question on some sort of measuring scale (e.g., a test score, a count of occurrences, a rating scale, a change-score indicating progress of some sort). For each variable, for which you are making a hypothesis, indicate in the table below the measurement that you will be statistically analyzing when you test your hypothesis.
16. **Additional Information:** To explain more fully how you intend to test your hypothesis, you might find it helpful to supply additional information. For example, you might intend to partition the data by gender, or make differential hypotheses for different age ranges. Supplying "additional information" is optional; but if there is some aspect of the hypotheses testing that is important for us to know about, please supply the information in this section.
- 16a. For each outcome variable that will not be measured by a standardized assessment procedure, describe the measurement procedures that will be used. For instance, if your county has developed a risk-assessment tool that you will be using to measure change, please describe how it works.
17. **Significance Test:** In order for a statistical procedure to be the appropriate test of a particular hypothesis, certain assumptions must be met. It is critical at the outset of a research design to make sure that the measuring devices, measuring scales, samples, and methodology produce the kind of data that fit the requirements of the intended statistical procedure. In this section, please list your choice for the testing of your hypothesis, given the research design you have chosen, the measurement you will use, and the data you will be collecting.

Variable	Score/Scale	Additional Information	Significance Test
ARREST	COUNT/PRO-PORTION	LEVEL/TYPE OF OFFENSE	CHI SQUARE AND OR T-TESTS WILL BE USED ALONG WITH SIMPLE REGRESSION.
STABLE RESIDENCE	COUNT/PRO-PORTION		SAME AS ABOVE
CUSTODY DAYS	COUNT/MEAN		SAME AS ABOVE
EMPLOYMENT	COUNT		SAME AS ABOVE
CARETAKER	COUNT		SAME AS ABOVE
ASSESSMENT	SCORE		SAME AS ABOVE
COMPLIANCE WITH PROBATION CONDITIONS	RATIO		SAME AS ABOVE
NUMBER OF RE-ADMISSIONS	COUNT/ MEAN		SAME AS ABOVE

The following questions are supplemental to the Research Design Summary Form and will help us understand how you intend to manage data collected for this project.

18. What additional background information (if any) will be collected for the participants (both treatment and comparison)? For instance, will you gather information about family criminal background, drug involvement, family variables, work history, educational background, etc. If so, what will be collected and how?

GENERALLY, THE VARIABLES LISTED IN QUESTION 9a. WILL BE COLLECTED. ADDITIONAL INFORMATION WILL BE COLLECTED FOR THE PROCESS EVALUATION (SEE QUESTIONS #19 AND #20.

19. How will the process evaluation be performed? What components will be addressed and how will they be measured (e.g., services available and frequency of use of those services by each participant)? What is the time frame for gathering process-related information? What recording mechanisms will be used? If descriptive or statistical analyses will be performed, please describe what they will be.

THE PROCESS EVALUATION WILL BE DESCRIPTIVE AND ANSWER THE FOLLOWING QUESTIONS: WAS THE PROJECT IMPLEMENTED AS INTENDED? WAS THE TARGET POPULATION SELECTED AS PLANNED? WHAT WERE THE FEATURES OF THE COLLABORATION? WHAT FACTORS, BOTH INTERNAL AND EXTERNAL, ENHANCED, OR CONVERSELY, IMPEDED THE PROJECT EFFECTIVENESS? THE EVALUATOR WILL ATTEND ALL PROJECT TEAM MEETINGS AND REVIEW ALL PROGRAM DOCUMENTATION. IN ADDITION, ALL PROJECT TEAM MEMBERS WILL BE INTERVIEWED AT LEAST TWICE DURING THE LIFE OF THE PROGRAM TO ASSESS PERCEPTIONS OF PROGRAM EFFORTS AND EFFECTS.

20. Describe how you will document services received by the treatment and comparison group members. Examples are: how many counseling sessions did the subject attend, how intense (and by what measure) was the drug treatment, did the subject complete the interventions, etc.?

BOTH GROUPS WILL PARTICIPATE IN THE INITIAL ASSESSMENT AND INTAKE INTERVIEW. RECIDIVISM DATA WILL BE COLLECTED SIX MONTHS AFTER PROGRAM COMPLETION FOR SUBJECTS IN BOTH GROUPS. HOPEFULLY, INCOME AND EMPLOYMENT DATA WILL ALSO BE OBTAINED FOR THE CONTROL SUBJECTS, BUT THIS MAY NOT BE POSSIBLE IF IT IS NOT DOCUMENTED IN PROBATION FILES.

21. What will be the criteria for completion of the program (by what criteria will you decide that the research subject has received the full measure of the treatment that is hypothesized to have a beneficial impact. For instance, will the Program run for a specified amount of time irrespective of the participants' improvement or lack thereof? If so, how long? Alternatively, will completion be determined by the participants' having achieved a particular outcome? If so, what will that outcome be and how will it be measured? An example is decreased risk as measured by a "level of functioning" instrument.

EACH SUBJECT WILL BE IN THE PROGRAM FOR A MINIMUM OF NINE MONTHS TO ONE YEAR. COMPLETION IN PHASE III WILL BE DETERMINED BY A POSITIVE CHANGE ON THE GAF SCORE AND DECREASED RISK/NEEDS ASSESSMENT OR PROGRAM COMPLIANCE WITH A MENTAL HEALTH TREATMENT PROGRAM.

DATA WILL ALSO BE COMPILED ON TREATMENT SUBJECTS' COMPLIANCE WITH PROGRAM EFFORTS. TREATMENT CONDITIONS WILL CORRESPOND TO PROBATION CONDITIONS ONLY TO

AN EXTENT. CONDITIONS WILL DIFFER BASED ON THE ASSESSMENT AND CASE MANAGEMENT PLAN. DATA TO BE COLLECTED MIGHT INCLUDE NUMBER OF COUNSELING SESSIONS, VOCATIONAL TESTING, SKILL BUILDING, OR JOB PLACEMENT. SUBJECTS MAY BE IN THE PROGRAM FOR UP TO ONE YEAR.

22. If Program completion will be linked to probation terms, how will you record those terms and identify adequate completion? Examples include completion of mental health or substance abuse programs, etc.

PROBATION WILL NOT BE LINKED EXCLUSIVELY TO TREATMENT CONDITIONS SINCE PROBATION TERMS ARE GENERALLY FOR 3 TO 5 YEARS. SPECIFIC TERMS OF PROBATION RELEVANT TO THE MENTALLY DISORDERED OFFENDER PROGRAM WILL BE INCORPORATED INTO THE SUBJECTS' TREATMENT PROGRAM PLANS. THESE TERMS WILL BE EVALUATED THROUGHOUT EACH PHASE OF THE MDO PROGRAM.

23. On what basis will a subject be terminated from the Program and be deemed to have failed to complete the Program? Will those who leave, drop out, fail, or are terminated from the Program be tracked in terms of the research dependent variables? For how long?

SUBJECTS WILL BE TERMINATED IF THEY ARE SENT TO PRISON, THEIR WHEREABOUTS BECOME UNKNOWN, OR IF THEY MAKE CREDIBLE THREATS OF VIOLENCE TOWARD STAFF OR OTHERS, OR IF THEY PRESENT CONTINUOUS ONGOING NON-COMPLIANCE ISSUES. THEY WILL BE TRACKED TO THE EXTENT THAT WE CAN FIND THEM.

MIOs WHO RE-OFFEND WILL NOT BE TERMINATED. WE EXPECT RE-OFFENDING TO OCCUR WITH THIS POPULATION BASED ON THEIR CHARACTERISTICS. WE INTEND TO REDUCE THEIR RE-OFFENSES AND WILL COMPARE OFFENSES PRIOR TO PROGRAM ENTRY. WE EXPECT THAT THEIR RATE OF RE-OFFENDING WILL BE LESS THAN THE RATE FOR THE CONTROL GROUP.